

# Tables

---

<b>1</b>	<b>Assessing the need for change</b>	<b>1</b>
1-1	Medicare benefits and cost-sharing requirements, 2002	5
1-2	Products and services traditional Medicare does not cover, 2002	10
1-3	Self-reported access to care for community-dwelling beneficiaries, by selected characteristics, 1999	13
1-4	Spending on health services for Medicare beneficiaries, by source of payment, 1999	15
<b>2</b>	<b>Coverage beyond the basic benefit package</b>	<b>25</b>
2-1	Eligibility, premiums, and benefits by source of additional coverage	30
2-2	Self-reported access to care for community-dwelling beneficiaries, by source of additional coverage, 1999	31
2-3	Use of clinically necessary services by supplemental coverage status	32
2-4	Sources of additional coverage by selected beneficiary characteristics, 1999	34
2-5	Estimated spending on medical services for Medicare beneficiaries, by source, 2002	37
<b>3</b>	<b>Options for changing the benefit package</b>	<b>41</b>
3-1	Illustrative changes to Medicare's cost sharing	49
3-2	Illustrative prescription drug benefit options	53
3-3	Current law compared with illustrative comprehensive benefit package	60
3-4	Changes in 2002 spending under a comprehensive benefit package, scenario 1	61
3-5	Changes in beneficiaries' direct spending under a comprehensive benefit package, scenario 1, by spending decile	62
3-6	Changes in 2002 spending under a comprehensive benefit package, scenario 2	63
3-7	Changes in beneficiaries' direct spending under a comprehensive benefit package, scenario 2, by spending decile	64
<b>A</b>	<b>Preventive services and Medicare</b>	<b>67</b>
A-1	Recommended coverage and Medicare coverage of clinical preventive services	70
<b>B</b>	<b>Sources of additional coverage for Medicare beneficiaries</b>	<b>73</b>
B-1	Benefits, enrollment, and average premiums in standardized Medigap plans, 2000	77

# Figures

---

<b>1</b>	<b>Assessing the need for change</b>	<b>1</b>
1-1	An aging United States population	8
1-2	Percentage of people age 70 or older who reported having selected conditions, 1984 and 1995	9
1-3	Per capita total spending on health services, 1999	15
1-4	Per capita total spending on health services, by source of payment, 1999	16
1-5	Sources of additional health coverage for Medicare beneficiaries, 1999	17
1-6	Composition of out-of-pocket spending, by out-of-pocket spending level, 1999	18
1-7	Composition of out-of-pocket spending, by type of supplemental insurance, 1999	19
<b>2</b>	<b>Coverage beyond the basic benefit package</b>	<b>25</b>
2-1	Total spending on Medicare beneficiaries' health care services, by source, 2002	38
2-2	Spending on Medicare beneficiaries' health care, by type of service, 2002	38
<b>3</b>	<b>Options for changing the benefit package</b>	<b>41</b>
3-1	Medicare and beneficiary shares of prescription drug spending under illustrative drug benefit options	54